|   |                  |                                    |                  |      |                     | Application or Docket Number |     |                               |                        |  |  |
|---|------------------|------------------------------------|------------------|------|---------------------|------------------------------|-----|-------------------------------|------------------------|--|--|
| PATENT APPLICATION FEE DETERMINATION REC<br>Effective October 1, 2000 |                  |                                    |                  |      | 099303 6s           |                              |     |                               |                        |  |  |
| •   |                  |                                    |                  |      | SMALL ENTITY TYPE C |                              |     | OTHER THAN<br>OR SMALL ENTITY |                        |  |  |
| TOTAL CLAIMS .  | 9                |                                    | 2.44             | RA   | TE                  | FEE                          |     | RATE                          | FEE                    |  |  |
| OR  | NUMBER FILED     | ILED NUMBER EXTRA                  |                  | BASI | FEE                 | 355.00                       | OR  | Basic Fee                     | 710.00                 |  |  |
| OTAL CHARGEABLE CLAIMS  | 4 _ minus 20=    | us 20= ' 6                         |                  | X\$  | 9=                  |                              | OR  | X\$18=                        |                        |  |  |
| NDEPENDENT CLAIMS   | /_ minus 3 = 0   |                                    |                  | X4   | X40=                |                              | OR  | X80=                          |                        |  |  |
| MULTIPLE DEPENDENT CLAIM PRESENT                                      |                  |                                    |                  | +13  | 35=                 |                              | OR  | +270=                         |                        |  |  |
| If the difference in column 1 is less than zero, enter "0" in colum   |                  |                                    | olumn 2          | TO   | TAL                 |                              | OR  |                               | 710.0                  |  |  |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)          |                  |                                    |                  |      | ALL                 | ENTITY                       | OR  | OTHER                         | THAN                   |  |  |
| CLAIMS REMAINING AFTER AMENDMENT                                      | NU<br>PREV       | MBER<br>MBER<br>MOUSLY<br>D FOR    | PRESENT<br>EXTRA | RA   | TE                  | ADDI-<br>TIONAL<br>FEE       |     | RATE!                         | ADDI-<br>TIONAL<br>FEE |  |  |
| Total . 16  | Minus ·          | 7()                                | s '              | X\$  | 9=                  |                              | OR  | X\$18=                        |                        |  |  |
| Independent,  | Minus            | 3                                  | 3                | X4   | 0=                  |                              | OR  | X80=                          | 200                    |  |  |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM                        |                  |                                    |                  |      | <br>35≈             |                              | 1   | +270=                         | 1 195                  |  |  |
|   |                  |                                    |                  |      | OTAL                | <u> </u>                     | OR  | YOTAL                         | All Control            |  |  |
| (Column 1)  | (Cól             | umn 2)                             | (Column 3)       | ADDI | r. FEE              | L                            | JOR | ADDIT FEE                     |                        |  |  |
| CLAIMS REMAINING AFTER AMENDMENT Total                                | NU               | SHEST<br>IMBER<br>VIOUSLY<br>D FOR | PRESENT<br>EXTRA | RA   | TE                  | ADDI-<br>TIONAL<br>FÈE       |     | RATE                          | ADDI-<br>TIONAL<br>FEE |  |  |
| Total 26  | Minus : ••       | 20                                 | = 6              | X\$  | 9=                  |                              | OR  | XS 2                          | 300                    |  |  |
| E IIION MANUEL  | Minus •••        | 3                                  | 2                | X    | 0=                  |                              | OR  | X80= ,                        |                        |  |  |
| FIRST PRESENTATION OF N   | ULTIPLE DEPENDEN | YT CLAIM                           |                  | 41   | 35=                 |                              | OR  | +270=                         |                        |  |  |
| a6,47   |                  |                                    |                  | I    | OTAL                |                              | 4 . | TOTAL<br>ADDIT. FEE           |                        |  |  |
| (Column 1)  |                  | umn 2)                             | (Column 3)       |      |                     |                              | 4   | -                             | 1                      |  |  |
| CLAIMS REMAINING AFTER AMENDMENT                                      | NU<br>PRE        | SHEST<br>MBER<br>VIOUSLY<br>ID FOR | PRESENT<br>EXTRA | R/   | TE                  | ADDI-<br>TIONAL<br>FEE       |     | RATE,                         | ADDI-<br>TIONAL<br>FEE |  |  |
| Total independent   | Minus ••         |                                    | =                | X\$  | 9=                  |                              | OR  | X\$18=                        |                        |  |  |
| Independent •   | Minus •••        |                                    | =                |      | 10=                 |                              | OR  | X80=                          |                        |  |  |

FORM PTO-078 (Rev. 0/00)

Patent and Tradsmark Office, U.S. DEPARTMENT OF COMMERCE \*U.S. GPO: 2000-460-706/30103

TOTAL ADDIT: FEE

<sup>\*</sup> If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

\*\* ADDIT. FEE OR ADDIT.

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.